Coronavirus (COVID-19) in Papua 1 Province

Farneubun, Petrus K

Published in:
In Brief

Department of Pacific Affairs

Coronavirus (COVID-19) in Papua[1] Province: An Increase in Case Numbers and the Challenges Ahead

Petrus K. Farneubun

In Brief 2020/20

Though some provinces in Indonesia have seen a decline in new COVID-19 cases or begun to show signs of stabilisation, others' numbers continue to increase. Papua Province is experiencing a daily increase in positive cases of COVID-19. As of 24 May 2020, the number of reported positive cases in Papua Province had reached 629, making Papua one of the provinces with the highest recorded number of cases in Indonesia.[2] This In Brief focuses on Papua Province with an emphasis on Jayapura and Mimika, the epicentres of COVID-19 in the province. It discusses factors contributing to the increase in cases and how the provincial government has endeavoured to contain transmission.

Positive cases in Papua Province

The Papua Province COVID-19 Task Force provides a comprehensive daily report of new infections. The first two positive cases of COVID-19 in Papua Province were reported on 21 March 2020. Though these were the first confirmed cases, four patients had been being treated as 'under supervision' since 16 March as they had developed symptoms after travelling to infected areas or contact with infected persons. While steps such as contact tracing have been undertaken since the confirmation of the first two positive cases to prevent transmission to the wider community, they have failed to reduce the transmission rate.

The data provided by the Papua Province COVID-19 Task Force demonstrates that the distribution of the confirmed positive cases varies considerably across regencies in Papua Province, with some hit harder than others. For example, the city of Jayapura currently has the highest number of infected people, followed by Mimika and Jayapura regencies. There has been no data or analysis available to explain the regional variations. A recent article by Johni R.V. Korwa shed light on the COVID-19 situation of the province as a whole, but does not address the variations.

While it is difficult to determine the causes of the variations among regencies, the COVID-19 hotspots appear to coincide with the economic hubs. Jayapura is the capital city of Papua Province and its Sentani Airport is the busiest airport. There are direct flights from Jakarta and Makassar in South Sulawesi to Jayapura. Sentani Airport also serves as the main point of entry to other regencies in Papua. The first COVID-19 patient in Merauke Regency, for example, transited through Jayapura upon returning from Bogor in Java on 4 March 2020. This patient had attended a seminar in Bogor, from which a number of other participants also tested positive. Mozes Kilangin, the airport in Mimika, is also one of Papua's busiest airports and serves as a transit hub to other parts of the province. Mimika is also home to Freeport's Grasberg mine, run by the world's biggest gold mining company. As many as 51 mine employees are among those infected with COVID-19 in the region, making Tembagapura district in the Freeport area a new cluster of local transmission. The Mimika cases are suspected to have come from clusters in Lembang and Jakarta. This suggests that these cases originated from outside the province. As the main point of entry to the province and its economic hub, Mozes Kilangin may have contributed to the increase in cases in Jayapura and Mimika regencies.

In addition to regional variations in case numbers, the data provided by the Papua Province COVID-19 Task Force also shows variations in the weekly number of cases reported. For example, a significant increase of 35 cases was recorded from 5 to 10 April, and a further increase to 98 cases from 26 April to 2 May.

Factors contributing to the increase in COVID-19 cases

While the status of the two regencies as transport and economic hubs may account for the province's increase in case numbers, there are also other factors that could be considered significant to the rapid spread of COVID-19 in Papua.

In his In Brief, Korwa states that the Papua government responded quickly by closing its borders. This assessment is true if the Papuan government's response is compared to that of other provinces and the central government, which didn't impose a travel ban until 23 April. However, if the window of time wherein possibly infected people could have entered Papua Province prior to the government's border restrictions is considered, the decision could have been made much earlier.

The decision by the Papua government to restrict entry to the province was announced on 24 March and took effect on 26 March. It came after other provinces, such as Jakarta, had seen cases increasing since early March and potentially infected people had already been travelling to Papua from these areas. The decision was made in a joint statement signed by the governor of Papua, some regents, military and police officials, the speaker of Papua provincial parliament and other stakeholders.

The same day the joint statement was released, the governor issued a letter to the Ministry of Transportation requesting the imposition of a temporary ban on travel into Papua. However, on 26 March, Indonesia's central government, through the Directorate General of Air Transportation, instructed that all airports in Papua continue to operate as usual.

These inconsistent approaches at national and provincial levels, including a lack of coordination between them, appear to have affected the handling of the pandemic. On the one hand, an assessment of the local situation prompted the provincial government, with the support of people in Papua, to impose a travel restriction policy. This decision was reasonable given the lack of necessary health facilities, medical equipment, including rapid test kits, and medical personnel in Papua, as made clear by the head of the Papua Province COVID-19 Task Force Silwanus Sumule. The province has 45 hospitals, of which only 16 are designated as referral hospitals for COVID-19.

On the other hand, the central government, referring to the quarantine provisions in the Law on Health Care (No. 6/2018), took the position that decisions regarding transportation closures are the authority of the central government, hence the central government's prompt rejection of the provincial government's travel ban. The central government preferred physical distancing measures over travel restriction to combat the virus.

In addition to the divergent responses of the provincial and central governments, it could be argued that the rapid increase in the spread of COVID-19 was due to local transmission and high mobility among the Papua Province population. Both national and provincial measures requiring people to self-isolate (or stay at home) and employ social and physical distancing are not being fully practiced, resulting in an increase in the number of cases. The Vice Governor of Papua Klemen Tinal has pointed to a lack of self-discipline and unpractised physical distancing among the people. That locally acquired cases are contributing more to the significant increase in cases than cases brought in from other locales can be seen by the period when the number of cases spiked. For example, though the mobility of people was highly restricted, the number of new confirmed cases continued to increase, and is still rising today. This suggests that local transmission is now the primary cause. It also suggests that systematic contact tracing is either not being done effectively due to a lack of resources or there is an underreporting of symptoms.

Conclusion

Though the provincial government has taken a series of measures to break the chain of COVID-19 transmission, keeping the virus at a manageable level or even stopping its spread remains a formidable task. The challenges facing Papua Province include a lack of health facilities, limited supplies of clinical care equipment, shortages of testing kits and a lack of discipline among the population in observing self-quarantine or limiting mobility.

Author notes

Petrus K. Farneubun is a lecturer in international relations at Cenderawasih University in Papua, Indonesia. He is currently pursuing his PhD at the University of Groningen, the Netherlands.

Endnotes

1. The term 'Papua' here refers to Papua Province of Indonesia, as distinct from West Papua Province.
2. However, this does not necessarily mean Papua has the highest infection rate. For example, as of 24 May 2020, the number of reported positive cases in West Papua Province was 130. West Papua, with a population of about 959,617 (Papua Barat Dalam Angka 2020:42) thus has an infection rate of approximately 7.4 per 1000 individuals. Papua, population 3,338,000 (Papua Dalam Angka 2020:139), thus has an infection rate of approximately 5.3.

The Department of Pacific Affairs (DPA) in the ANU College of Asia & the Pacific is a recognised leading centre for multidisciplinary research on the contemporary Pacific. We acknowledge the Australian Government's support for the production of the *In Brief series.* The views expressed in this paper are those of the author/s and do not necessarily reflect those of the ANU or the Australian Government. See the DPA website for a full disclaimer.

dpa@anu.edu.au
DepartmentofPacificAffairs
@anudpa
dpa.bellschool.anu.edu.au

ISSN 2209-9557 (Print)
ISSN 2209-9549 (Online)